One-third of parents say flu vaccine is less important for their child than other vaccines.

Negative beliefs about flu vaccine safety and efficacy are more prevalent among parents of children who do not get flu vaccine.

One-third of parents of non-vaccinated children say the doctor recommended flu vaccine less strongly than other vaccines.

Inferiority Complex? Parents Rate Flu Lower Than Other Vaccines

Annual flu vaccination has been recommended for all US children 6 months to 18 years since 2008, yet rates of flu vaccination lag behind vaccination rates for measles, pertussis, and most other childhood vaccines. Little is known about reasons why fewer parents seek flu vaccination for their children.

In January 2016, the C.S. Mott Children’s Hospital National Poll on Children’s Health asked a national sample of parents to compare flu vaccine to other vaccines recommended during childhood.

Comparing Flu to Other Childhood Vaccines

Among the 1,367 parents completing this poll, 52% report that their child has received a flu vaccine this flu season. Children 1-5 years were more likely to be vaccinated than children 6-17 years (60% vs 49%).

In all aspects, parents rate flu vaccine less favorably than other childhood vaccines:

- 35% say flu vaccine is less important
- 33% say flu vaccine works less well
- 16% say flu vaccine undergoes less testing
- 15% say flu vaccine has more side effects

These negative beliefs about flu vaccine are much more common among parents whose child has not received a flu vaccine this season (Figure 1).

In addition, parents whose child has not received flu vaccine this season are much more likely than parents of a vaccinated child to say their child’s doctor recommends flu vaccine less strongly than other vaccines (32% vs 9%).

![Figure 1. Compared to other childhood vaccines, parents say flu vaccine...](image)
This report presents findings from a nationally representative household survey conducted exclusively by GfK Custom Research, LLC (GfK), for C.S. Mott Children’s Hospital via a method used in many published studies. The survey was administered in January 2016 to a randomly selected, stratified group of parents age 18 and older with at least one child age 1-17 (n=1,367). Parents were selected from GfK’s web-enabled KnowledgePanel® that closely resembles the U.S. population. The sample was subsequently weighted to reflect population figures from the Census Bureau. The survey completion rate was 54% among panel members contacted to participate. The margin of error is ±2 to 6 percentage points.

**Implications**

Despite substantial public health efforts, flu vaccination rates in the US remain below target levels. Results of this national poll shed light on the lagging rates for children; parents do not believe flu vaccine is as safe, as effective or as important as the other vaccines their children receive.

Flu vaccine recommendations for the US population have expanded incrementally over time. Initially, flu vaccine was recommended for seniors and people with chronic medical conditions. Over time, recommendations were expanded to include healthy children 6 months to 5 years of age, and then to all children. It is possible that changing recommendations contribute to parental attitudes; for example, if parents recall the previous emphasis on flu vaccine for the elderly, they may discount newer recommendations calling for vaccination of children.

Flu vaccine is different from other recommended childhood vaccines, in ways that can be confusing to parents. For example, the composition of flu vaccine changes from year to year, as scientists try to predict what strains of influenza will be most prominent; in contrast, the composition of other vaccines generally stays the same over time. The efficacy of flu vaccine varies from year to year, depending on how well the vaccine matches the circulating strains; other vaccines have a consistent efficacy profile. These differences may prompt parents to believe that flu vaccine is less tested and less effective.

Typically, parents are told that childhood vaccines are important to prevent their child from contracting serious disease. However, flu vaccine is known to prevent or lessen the severity of influenza. In other words, individuals who receive flu vaccine still may get influenza, but generally it will be a less severe case – something that is difficult to discern on an individual basis. This situation can lead parents to believe that flu vaccine doesn’t work – or that flu vaccine “caused” their child to get influenza.

Finally, a significant finding from this study is that parents whose children did not receive flu vaccine were three times more likely to say their child’s doctor does not recommend it as strongly as other childhood vaccines. This is consistent with other research showing that provider recommendations have a substantial influence on receipt of vaccines. Health care providers should take note of the disparity in parental beliefs found in this poll, and ensure that they fully explain and strongly recommend annual flu vaccine for all children.